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OUNDLE URBAN DISTRICT

REPORT ON THE ENVIRONMENTAL
HEALTH OF THE DISTRICT.

1967

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HEALTH OF THE DISTRICT.

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COUNDEE URBAN DISTRICT COUNCIL

Members of the Public Health Committee: 20th May, 1967 to 30th September, 1967.

COUNCILLORS MRS. L. MASON, Chairman, MR. R. W. CHASEY, Vice-Chairman, F. B. BENNETT,
T. A. CUMINGTON, A. A. LEE, R. E. SUTTON

COUNCILLOR J. A. MARSHALL was a member ex-officio

Members of the Public Health Committee: from 1st October, 1967

COUNCILLORS D. WRIGHT, Chairman, H. G. GANDERTON, Vice-Chairman, R. A. McMICHAEL,
J. W. WELD, A. B. A. WRIGHT.

COUNCILLOR, J. A. MARSHALL, was a member ex-officio

Public Health Officers of the Local Authority

Medical Officer of Health

J. C. MacInnes, M.B., Ch.B., D.P.H. to 30th September, 1967

Acting Medical Officer of Health

Joan M. St. V. Dawkins, M.B., B.S., D.P.H., D.C.H. from 1st October, 1967

Public Health Inspector

R. E. T. Chinnery, F.F.S., M.I.P.H.E., M.A.P.H.I.

Health Department,
County Offices,
Guildhall Road,
Northampton.

Tel:
Northampton. 34833

To the Chairman and Members of the Oundle Urban District Council.

Mr. Chairman, Madam and Gentlemen,

I have the honour to present the Annual Report of the Medical Officer of Health incorporating that of the Public Health Inspector. This report serves two functions the first to give an account with statistics of the environmental health of the town the second to make some observations on those trends in the general pattern of living which show evidence of becoming a hazard to health either now or in the future.

The vital statistics for the year show that there were 51 deaths. This gives a standardised rate of 14.2 compared with 16.7 last year, and with the national figure of 11.2. The total number of births was 40 (of which three were illegitimate) compared with 56 last year and showing therefore a decrease of 16. There was one infant death notified during the year.

There was an increase in infectious diseases from three last year to 46 this year. This was due to an increase in measles notifications which was the only infectious disease notified, therefore, it is gratifying to record no cases of dysentery, food poisoning or infective hepatitis. Infective Hepatitis has been locally notifiable in the district since July 1962, but no cases were notified during this year. This year there were no deaths from tuberculosis.

It remains necessary, however, to maintain a watchful eye particularly in relation to food borne infection and to continue to keep a high level of immunisation in the community. Personal hygiene and high standards in the storage and preparation of food, are the most important factors in controlling the former, while for the latter it is necessary for parents not to neglect to have their children immunised to diphtheria, poliomyelitis, whooping cough, tetanus and smallpox, not forgetting the necessary booster immunisations. Tuberculosis vaccination follows later - in early teens. It is probable that next year vaccination against measles will be available and this almost universal and often unpleasant disease will be eliminated, thus saving much distress to children and expense to the economy.

Each year conditions improve and even in remote rural areas amenities are now available. Standards of health are high and the condition of our children from infancy to school leaving is probably the highest that has ever been achieved in our history. There remain, however, many challenges to be met, among which are mental illness, the enigma of cancer, rheumatic diseases with its allied affection of joints, bones and muscles, and the disturbing trend in the increase of early degenerative disease of the arteries. However, some illnesses can also now be delayed or even prevented by individual care. I list these latter conditions as my report, while seeking to provide a statistical account of the health of the district is also, in part, a vehicle for health education; in some conditions by modification of faulty living habits and by exertion of certain disciplines, ill health may be averted. Cigarette smoking is the most relevant in this context. The relationship of the habit and lung cancer, its association with chronic bronchitis and coronary heart disease, has now been universally accepted. The facts are known, yet the habit persists and probably consumption is increasing. The exhortations of health educators are failing and where there is no immediacy of danger, the public response is apathetic.

The majority of infectious diseases can now be either prevented by immunisation or averted by hygiene, early diagnosis and treatment by the many antibiotics now available. However, food borne infection causing inflammation of the intestinal tract is still a common occurrence. Regular inspection and the implementation of the Food Hygiene Regulations must be aided by personal action. Carelessness in food handling is often responsible for spread of infection. The keystone to prevention lies with individual personal hygiene, particularly in those who handle or prepare food, in adequate cooking of all meat, fish and poultry, and in careful storage of all foods.

Though people are living longer the death rate among middle-aged males remains too high. This is due to deaths from arterial disease resulting in coronary thrombosis, strokes and from cancer. The prevention of early arterial disease is a problem which now besets all civilised communities. It is a condition of multiple causes known and unknown, some of which are hereditary. Of those known facts, the salient one is that early arterial disease is not so evident in those who take regular physical exercise. Increasing transport, highly urbanised communities and sedentary amusements such as television, all contribute to a failure to take sufficient exercise. In addition food is abundant, highly refined and of a high calorie content, and many people have developed the habit of eating in excess of their needs. Excessive calorie intake without the compensatory effect of exercise combine to cause the degenerative condition which takes its toll from a valuable section of society who are at the time of life when their experience can contribute much to the community. Young people should be encouraged to be active in all forms of sport and physical exercise, to eat less sweets, ice-creams and other starchy foods and this habit should continue throughout life, modifying the exercise to be appropriate with the years.

I wish to give my thanks to Mr. Chinnery for his helpful co-operation during the year and for his work in the compilation of this report. I also thank the County Medical Officer of Health for his ready co-operation at all times.

I have the honour to be,

Your obedient servant,

JOAN M. ST. V. DAWKINS

Acting Medical Officer of Health

October, 1968.

SUMMARY OF VITAL STATISTICS, 1967

Area (in acres)	2,469
Population 1961 (census)	2,547
" 1967 (mid-year estimate)	3,590
Number of separate dwellings occupied 1961 (census)	789
" " " " " 1967	964
Rateable Value, 1967	£89,557
Product of a penny rate, 1967/68: Estimated	£302

LIVE BIRTHS

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	20	17	37
Illegitimate	2	1	3
	<hr/> 22	<hr/> 18	<hr/> 40

Crude birth rate per 1,000 population - 11.1

Area Comparability Factor - 1.3 Adjusted birth rate = 14.43

ILLEGITIMATE LIVE BIRTHS (per cent of total live births) - 7.5%

STILLBIRTHS - There were no stillbirths

DEATHS (all causes)	<u>Male</u>	<u>Female</u>	<u>Total</u>
	26	25	51

Crude death rate per 1,000 population - 14.2

Area Comparability Factor - 0.57 Adjusted death rate = 8.1

MATERNAL DEATHS Deaths ascribed to pregnancy, childbirth and abortion - NIL

INFANT MORTALITY

Legitimate
 Illegitimate

<u>Male</u>	<u>Female</u>	<u>Total</u>
-	-	-
1	-	1
1	-	1

Rate per 1,000 live births - 25.00

NATURAL AND SOCIAL CONDITIONS

AREA. The Urban District of Oundle covers an area of 2,469 acres. The density of population is 1.5 persons per acre. The number of separate dwellings is 964 and the housing factor is 3.7 persons per house.

POPULATION. The Registrar General in his return for 1967 gives the population as 3,590 which is an increase of 110 on last year. There was a natural decrease of 11 (i.e. deaths minus births) as compared with two last year.

BIRTHS. There were 40 births during the year which was 16 less than last year. The birth rate was 11.1 per 1,000 population compared with 17.2 for England and Wales.

ILLEGITIMATE BIRTHS. Three illegitimate births occurred, one more than last year and this gives a rate of 75.0 per 1,000 live births.

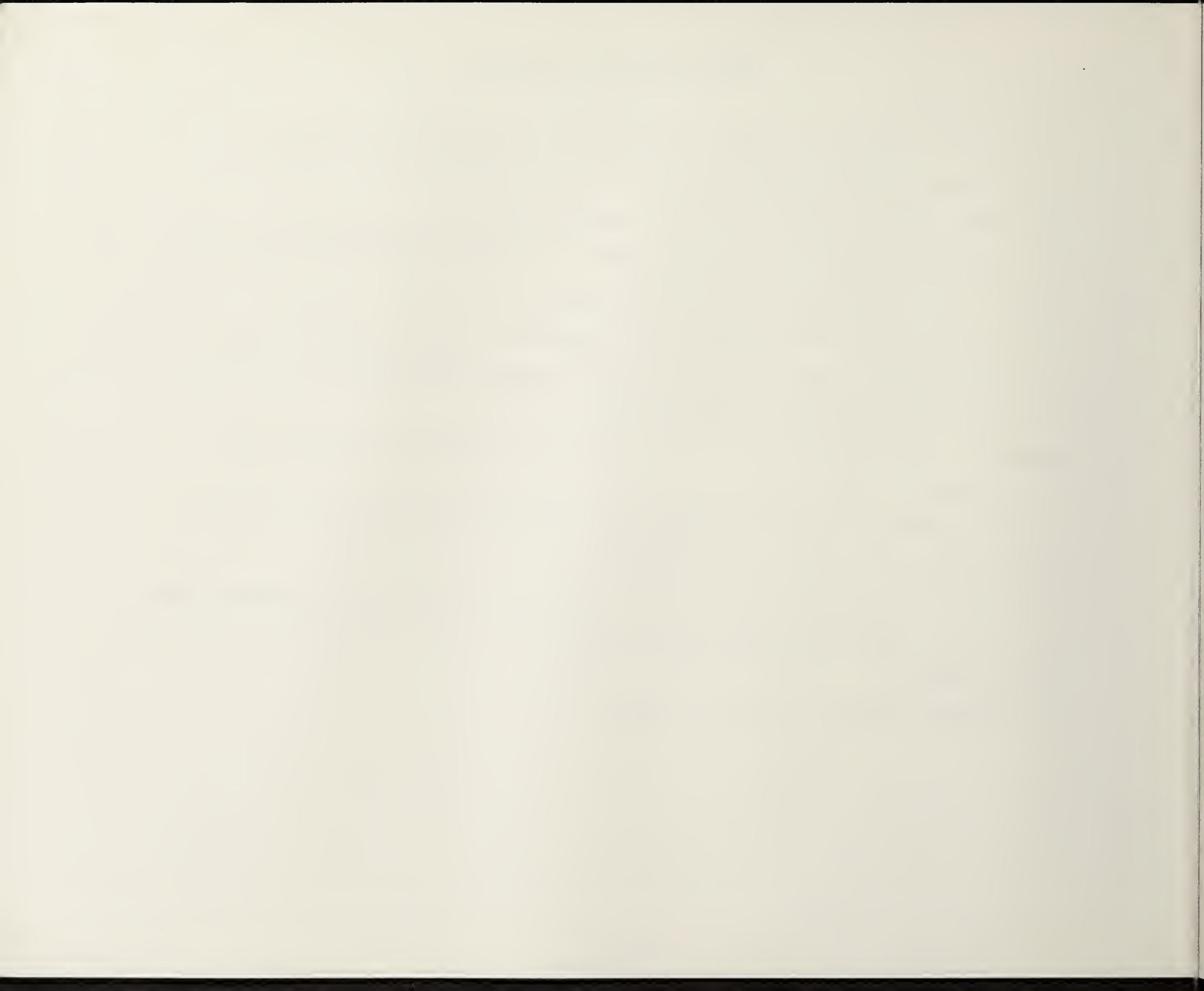
STILLBIRTHS. For the second year running there were no stillbirths recorded for the district.

DEATHS. Of the 51 deaths that occurred, 30 were ascribed to diseases of the heart and circulatory system, 6 to respiratory causes and 6 to some form of cancer.

MATERNAL DEATH. There were no maternal deaths

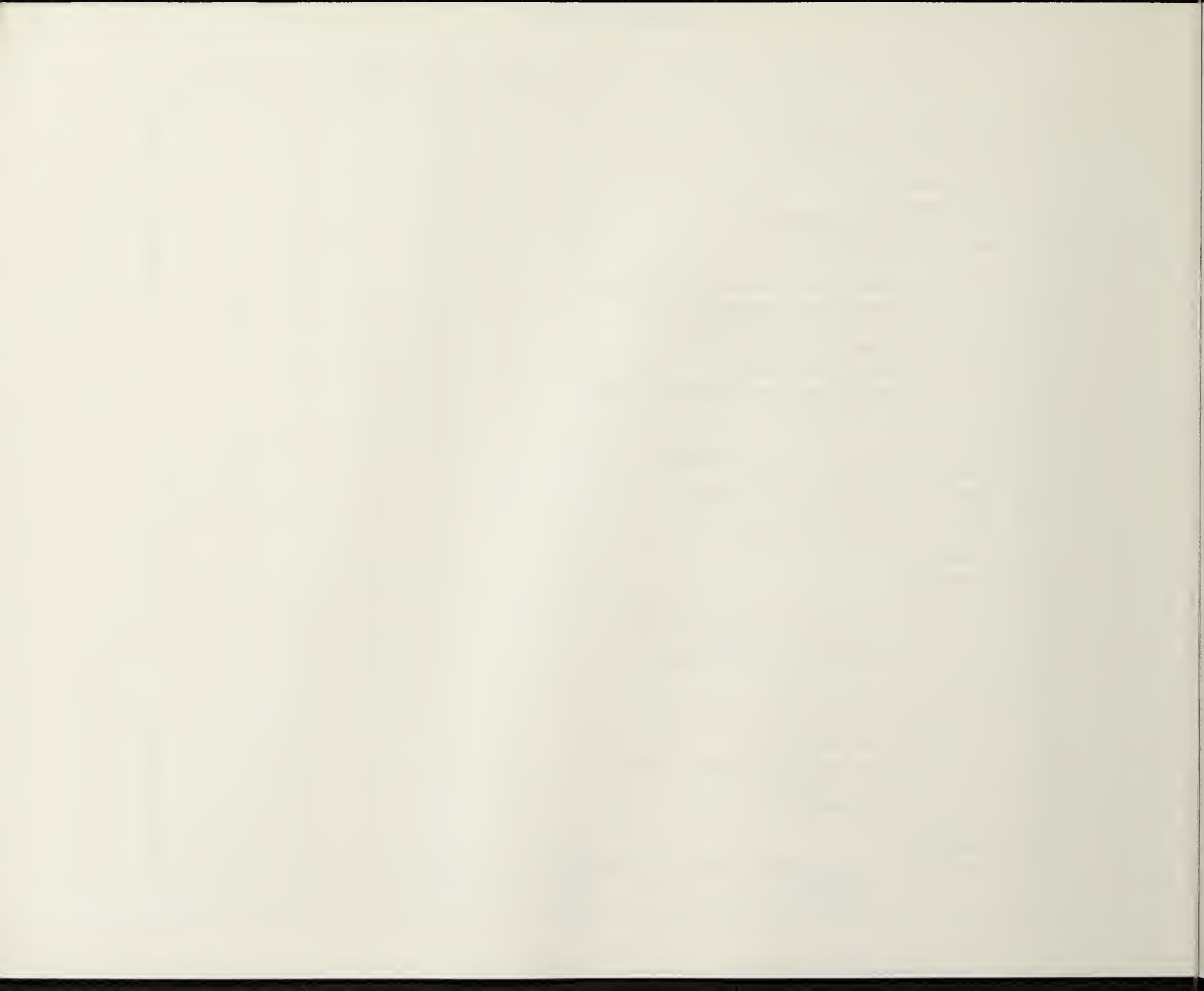
INFANT MORTALITY. There was one infant death, the cause of which was acute bronchopneumonia and influenza. This gives a rate of 25.00 per 1,000 live births, compared with 18.00 for the Administrative County and 13.3 for England and Wales.

NEONATAL MORTALITY	}	No deaths occurred.
EARLY NEONATAL MORTALITY		



CAUSES OF DEATH

Causes of Death	Male	Female	Total
1. Tuberculosis, respiratory	-	-	-
2. Tuberculosis, other	-	-	-
3. Syphilitic disease	-	-	-
4. Diphtheria	-	-	-
5. Whooping Cough	-	-	-
6. Meningococcal infections	-	-	-
7. Acute poliomyelitis	-	-	-
8. Measles	-	-	-
9. Other infective and parasitic diseases	-	-	-
10. Malignant neoplasm, stomach	-	1	1
11. Malignant neoplasm, lung, bronchus	2	-	2
12. Malignant neoplasm, breast	-	-	-
13. Malignant neoplasm, uterus	-	-	-
14. Other malignant and lymphatic neoplasms	2	1	3
15. Leukaemia, aleukaemia	-	-	-
16. Diabetes	-	-	-
17. Vascular lesions of nervous system	4	5	9
18. Coronary disease, angina	9	5	14
19. Hypertension with heart disease	1	-	1
20. Other heart disease	1	3	4
21. Other circulatory disease	1	1	2
22. Influenza	-	-	-
23. Pneumonia	2	2	4
24. Bronchitis	1	-	1
25. Other diseases of respiratory system	-	1	1
26. Ulcer of stomach and duodenum	-	-	-
27. Gastritis, enteritis and diarrhoea	-	1	1
28. Nephritis and nephrosis	-	-	-
29. Hyperplasia of prostate	-	-	-
30. Pregnancy, childbirth, abortion	-	-	-
31. Congenital malformations	-	-	-
32. Other defined and ill-defined diseases	-	3	3
33. Motor Vehicle accidents	1	-	1
34. All other accidents	2	2	4
35. Suicide	-	-	-
36. Homicide	-	-	-
Totals	26	25	51

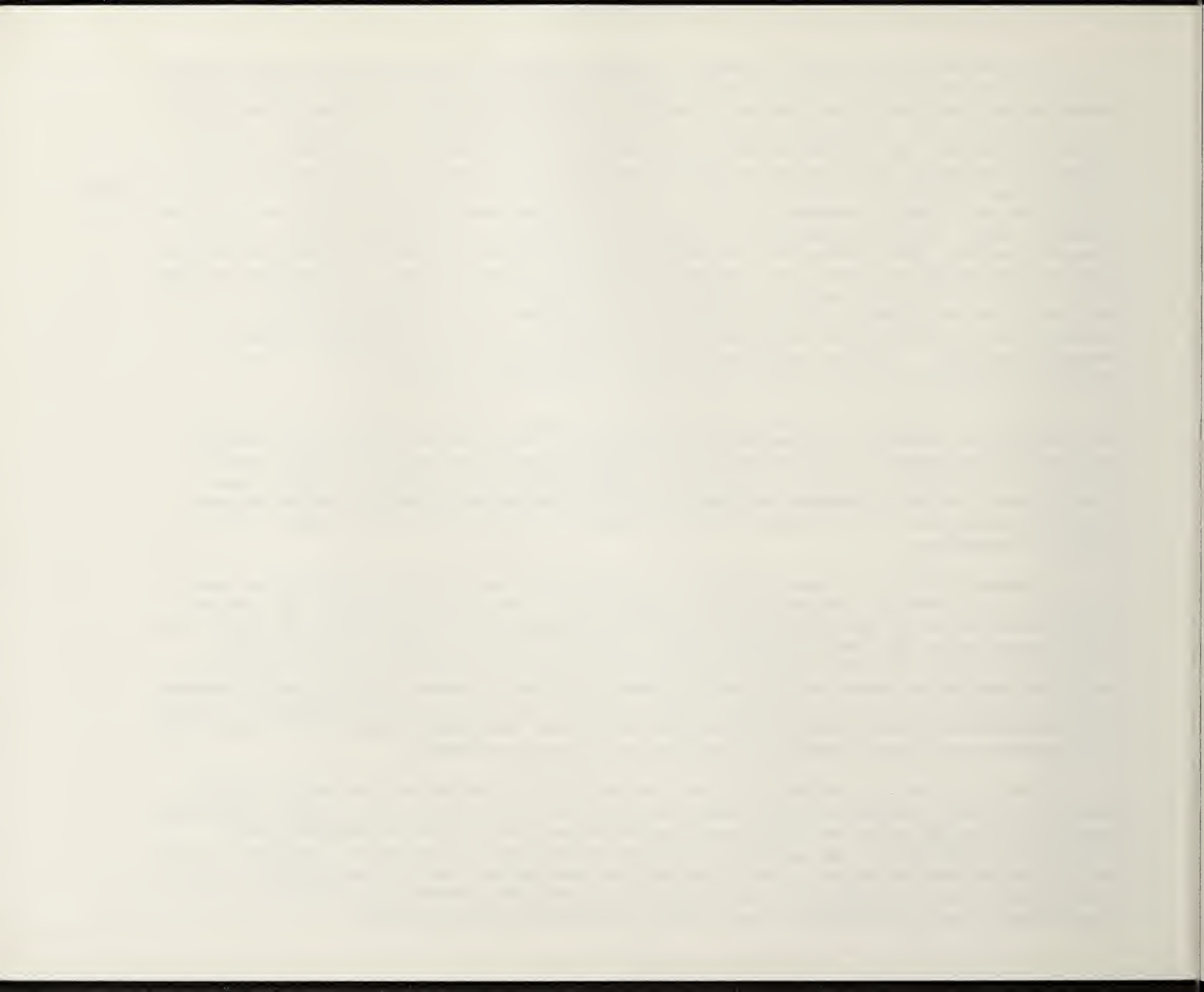


In a review of the causes of death the primary concern is to assess which could have been prevented. In the main, people are living longer and the majority of deaths are those which occur in the older age groups, and are primarily caused by degenerative disease of the arteries and the cancers, still the inevitable concomitants of the ageing process. However, coronary thrombosis, strokes and cancer of the lung are major causes of death in the middle aged male taking an increasing toll from men in their prime and at a time when they are making a major contribution to society. These are unnecessary deaths, and must be a serious cause of concern. Apart from a few who inherit a tendency to early arterial disease the condition results mainly from sedentary life. Certain groups are not affected, and these are men who take regular exercise. Farmers, postmen, gardeners and bus conductors are known to have a lower incidence of coronary disease than commercial travellers, business executives and bus drivers. The message is clear but few heed it. Regular exercise, throughout life should be the universal practice, and all members of society from childhood to old age should remember this precept. With the mechanisation of industry and increasing motor transport, the need for physical activity is every diminishing. It is therefore increasingly necessary that leisure instead of being sedentary should involve the taking of some form of pleasurable exercise.

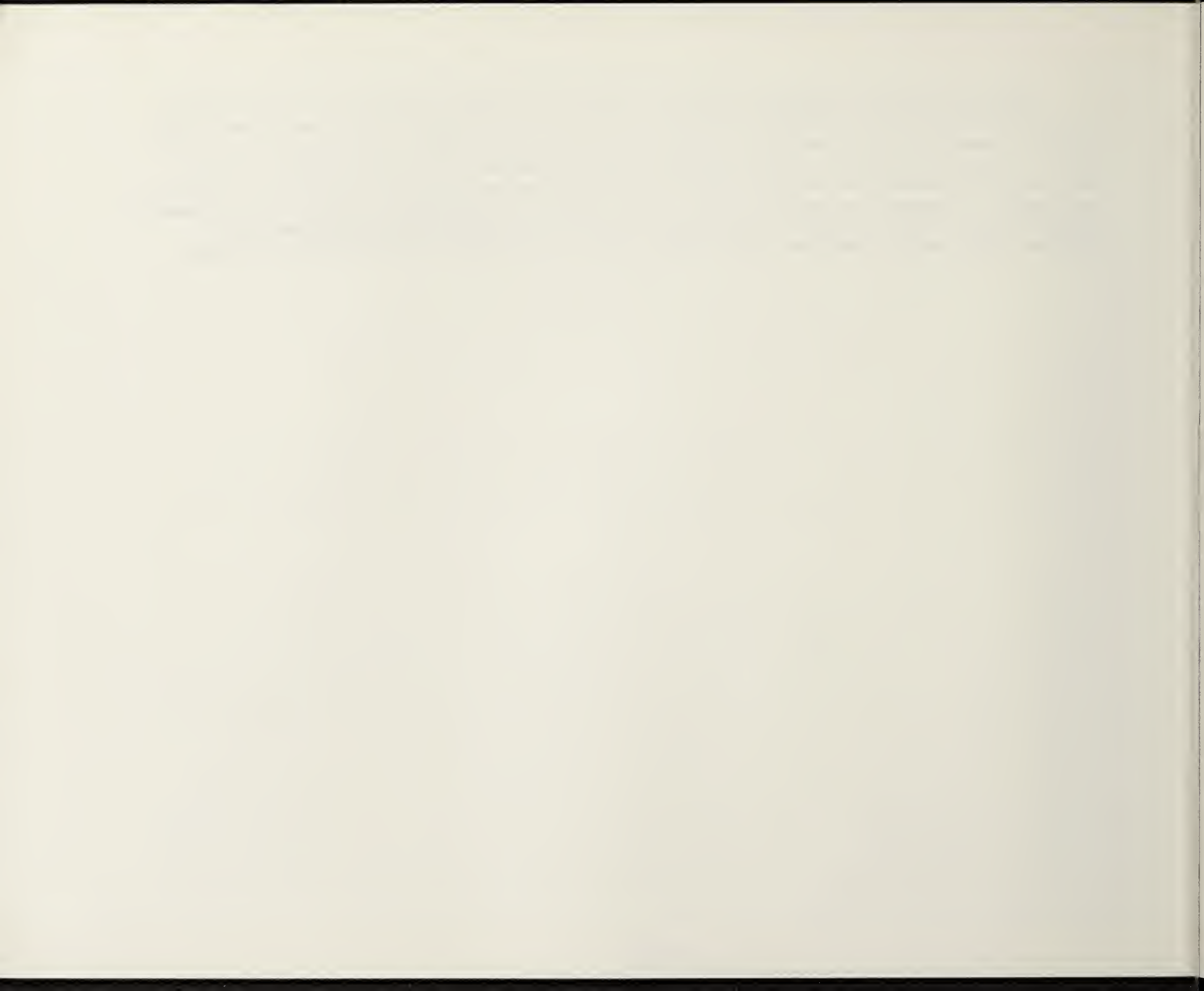
The mass production of highly refined food, its year round availability, and the means to purchase has enormously increased food consumption. This combined with lack of exercise, resulting in an excess of calorie intake over energy output is the probable major factor in cause of early arterial disease, the stress of modern life adding perhaps a further cause. Obesity needs now to be regarded as a major hazard to health particularly in males who are more prone than females to arterial disease. Females are however affected equally with men after the menopause.

Nationally this year again the number of deaths from cancer of the lung has increased, statistics also show an increase in a lower age group. Males still predominate but females are catching up due to the increase in the number of female cigarette smokers. In 1929, 2,751 died from cancer of the lung, in 1939, 6,214; in 1963, 24,434; in 1965, 26,399; in 1966, 27,013 and in 1967, 28,250; 23,946 males and 4,304 females. The relationship between heavy cigarette smoking and cancer of the lung has been firmly established. Yet each year thousands of young people start to smoke and many others continue to indulge in heavy cigarette smoking. Health education in this field appears to have failed and the public response to a habit which is pleasurable and where there is no immediacy of danger is apathetic.

Road accidents in Great Britain since the beginning of the century have caused 300,000 deaths. In 1966, 7,985 died on the roads compared with 7,952 in 1965 and in 1967, 7,319 died. Analysis by age has shown the 15-25 year group to be most at risk due to temperamental failures of individuals. The necessity of proper maintenance of the vehicle, habitual use of safety devices such as belts in cars or helmets on motorcycles, and driving with due consideration for the safety of other road users is stressed. Since the introduction of the breathalyser there would appear to be, so far, a decrease of 8% of deaths.



Confirmed figures regarding accidents in the home for 1967 have not yet been published but provisional figures indicate a general worsening of the situation. Falls constitute by far the most frequent cause of accidental death in and around the house, about 59 per cent of the total. Nearly 90 per cent of these fatalities were to people in the age group 65 and over. The next most common cause was poisoning followed by burns and scalds, and finally suffocation and choking. Attention to details such as fire guards, fire resistant materials for children's nightdresses, simple structural alterations in houses for elderly people and provision of physical aids, keeping medicines under lock and key, are required to prevent these deaths.



PREVALENCE OF, AND CONTROL OVER INFECTIOUS DISEASES

TUBERCULOSIS:

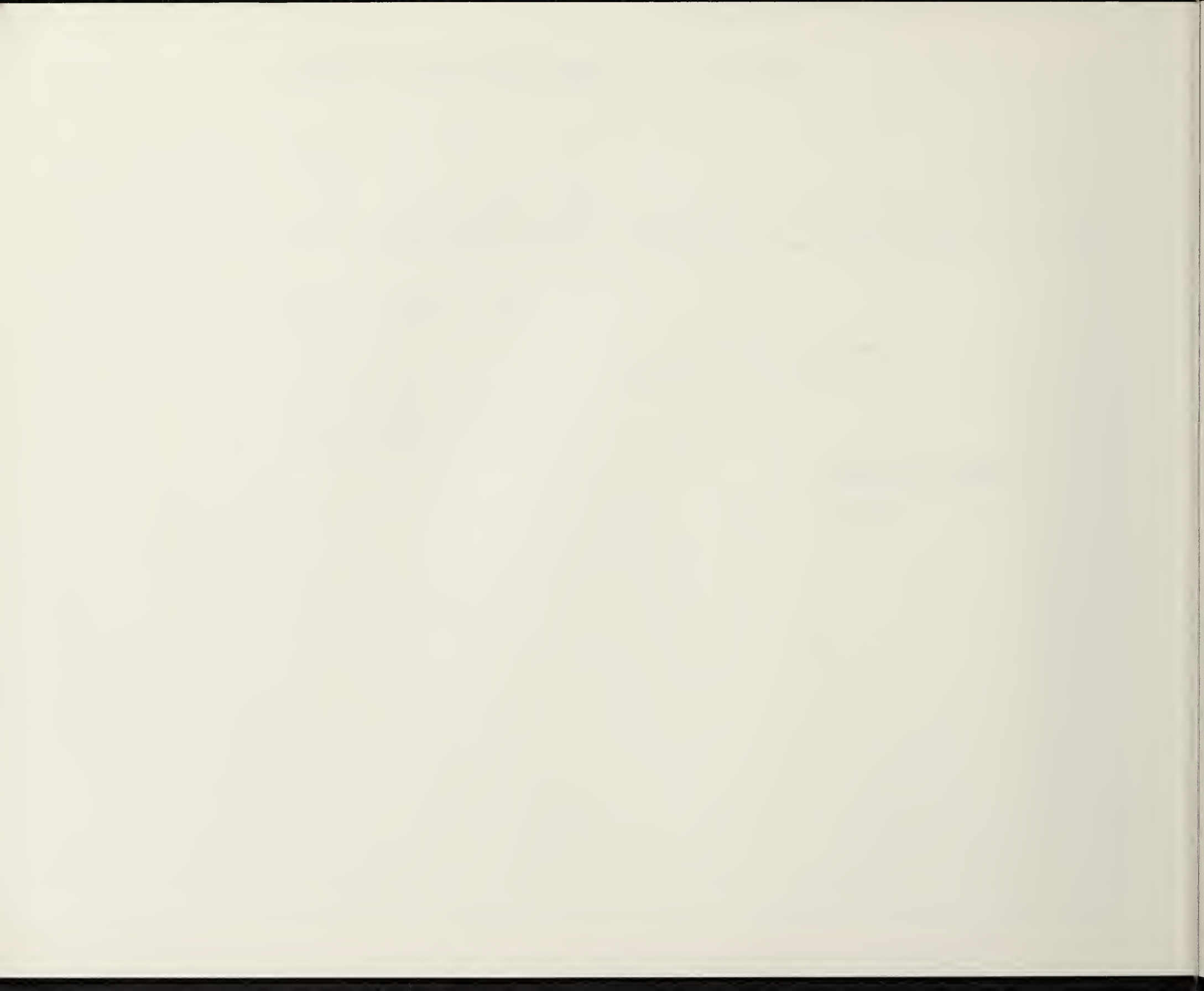
There were no cases of tuberculosis notified during the year.

The number of cases on the tuberculosis register was as follows:

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Pulmonary Tuberculosis	4	3	7
Non-pulmonary Tuberculosis	-	1	1
Total	4	4	8

Other Notifications

Measles 46



The total number of infectious diseases notified during the year was 46 an increase of 43 on last year's figure. This was ~~largely~~ due to an increase in the incidence of measles which continues to show its biennial pattern.

MEASLES. This highly infective illness from which few individuals escape has its incidence almost exclusively during childhood. It usually follows a biennial incidence, with high numbers occurring in alternate years. The course of the illness is almost invariably benign, but complications which include otitis media, pneumonia, eye infections and very occasionally encephalitis do occur, and the illness itself is often severe. Complications can be effectively dealt with by the many antibiotics which are now available, but these drugs are themselves not all without side effects, are expensive and involve medical supervision. An effective measles vaccine has now been developed and it is anticipated that this will be available for general use during the course of the next year, and it is anticipated that in future years measles in common with poliomyelitis and diphtheria will be virtually eradicated.

WHOOPING COUGH There were no notifications. This disease continues to exhibit its mild phase. The principal interest in its notification is that it gives some indication of the degree of streptococcal infection in the community.

POLIOMYELITIS No cases occurred, and this freedom can be ascribed to immunisation as the decline in incidence has occurred concurrently with vaccination. The oral Sabin vaccine is now used which gives a longer lasting immunity than the Salk or injected variety. A drink of syrup or a lump of sugar is also much more acceptable to the young patients than the previous needle prick.

FOOD POISONING It is pleasing to record that no cases were notified during the year.

The condition is usually caused by one of the Salmonella organisms, of which there are a large number. The commonest strain being that of typhimurium. Salmonella infection is common in bovines, and the incidence of infection on farms is now notified by the Divisional Veterinary Officer to the Medical Officer of Health. Farm workers are then warned of the possibility of human infection, and given details of hygiene precautions to prevent incidence in themselves or their families.

Other causes of food poisoning are staphylococcus which may gain entry to food from an infected spot on the face, hands or arms of a food handler which may cause a severe form of the illness. As the symptoms result from a toxin which is unaffected by heat, cooking the infected food, in this case does not prevent the illness. More rarely typhoid fever, botulism or chemical contaminants may occur. However the commonest germ is the salmonella which gains entry into food because of the faulty personal hygiene of food handlers. The sources of infection are numerous, probably uncooked contaminated (often imported) meat being today one of the most frequent.



SMALLPOX There were no cases. The vaccination of children is still necessary and should be carried out sometime during the first two years of life, preferably between the first and second year.

DIPHTHERIA There have been no cases of diphtheria in Northamptonshire since 1956. There is therefore with each successive year of freedom from infection, a diminishing recollection of the dangers of this illness. Mothers without the knowledge of the disease feel a false security and may not have their children immunised. That this is a dangerous situation cannot be too strongly stressed, as it is only by keeping up the numbers of children immunised that the disease be kept in check. It is the duty of all parents to have their children immunised, and if they fail to do so they neglect their welfare.

SHINE DYSENTRY There were no cases notified during the year.

INFECTIVE HEPATITIS The Minister of Health gave sanction that this disease should be made locally notifiable as from 1st July, 1962. By arrangement with other District Councils this also became operative in the County of Northamptonshire. However no cases were notified during the year.

Acute Infective Hepatitis is a disease caused by a virus, which attacks the liver and causes jaundice. It is mainly an infection of young people of faecal-oral spread, and with an incubation period of 15-50 days. The incriminative routes of infection are from food handlers, water, and children to their mothers. The virus is present in faeces 16 days before jaundice, and up to 8 days after. Serum hepatitis, which is another form of infective hepatitis, has a longer incubation period of 50-160 days and affects mainly adults and can be spread by blood transfusion and inefficiently sterilised equipment used by doctors, dentists nurses and drug addicts, and in the various tattooing processes. The clinical groups of these two types of hepatitis are indistinguishable. There is no specific treatment and a jaundiced adult would be away from work from six weeks to two months, and sometimes might not feel really fit for a year. Quarantine measures are of little value, and patients can be treated at home or in hospital provided adequate hand washing techniques are practised, with current disinfection of excreta. Serum hepatitis can be virtually abolished if disposal equipment was generally introduced. In this County disposable equipment is used by the County Health Department for all procedures involving immunisation. Gamma Globulin is of value for the protection of close contacts and pregnant women during epidemics.



Annual Report of the Surveyor and Public Health Inspector
for the year ended 31st December, 1967
submitted by

R. E. T. CHENERY, F.F.S., M.I.P.H.M., M.A.P.H.I.

Mr. Chairman, Madam and Gentlemen,

I have the honour to present my tenth annual report upon those matters about which the Ministry of Health require yearly details.

1. Water Supplies:

(a) The Wene and Ouse Water Board have maintained a satisfactory supply, both as regards quality and quantity throughout the year.

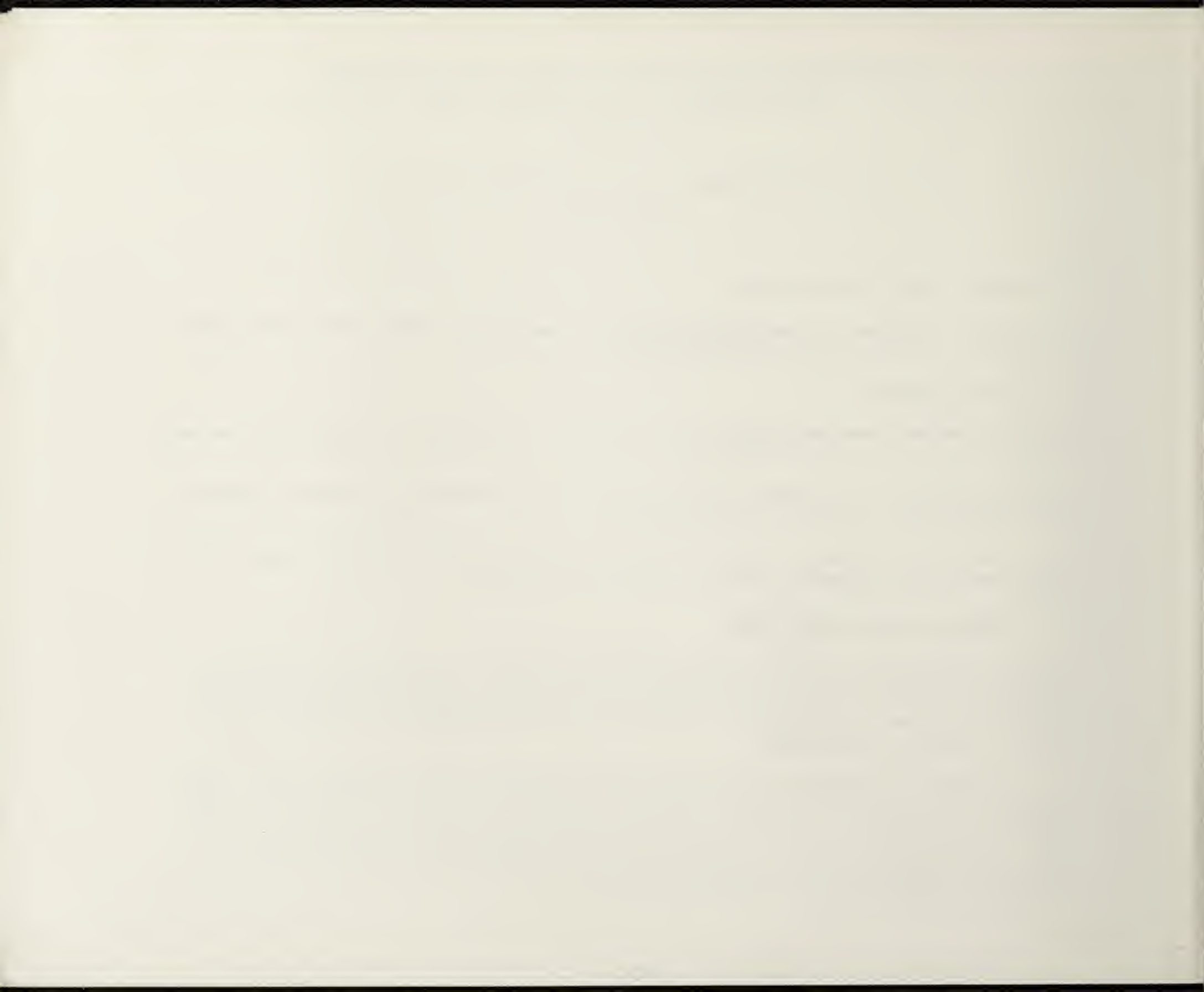
(b) Nine samples were submitted for bacteriological examination and all were reported as being satisfactory for domestic consumption.

(c) All dwelling houses and house-shops are supplied direct from the mains; the population served, Registrar General's estimate, was 3,590.

2. Sewerage and Sewage Disposal:

The difficulties previously experienced in maintaining a satisfactory effluent continued, particularly during the Spring and early Summer, when bacterial contact beds (filters) are often temperamental. The Council's Consulting Engineers advised that the disposal works were now overloaded, and that added capacity would be required to deal with the increasing population.

A request was received from the Oundle and Thrapston Rural District Council asking the Urban District Council to receive and treat sewage from certain parishes near Oundle and this was approved in principle, provided satisfactory financial arrangements were made. At the end of the year it appeared that this request would actually apply to sewage from Glapthorne only, and any extension to the Urban District Council's disposal works would, presumably, make provision for this.



As an interim measure, until the disposal works can be extended, the Council were advised that re-circulation of effluent should be introduced, for which underground works were incorporated during construction of the present disposal works. This step is therefore urgently required; at the present rate of development it will, however, give only a short respite and a scheme for enlarging the disposal works should be introduced without delay.

3. Common Lodging Houses:

There are none within the Urban District.

Housing

(a) Provision of New Houses by the Local Authority

43 houses and bungalows on the Springfield Road Estate and the Danfords Yard, West Street, scheme, for 7 Old Person's Bungalows, were completed during the year.

Ministry approval was also received for the final stage, of 25 houses and bungalows, to complete the Springfield Road Estate, but the Council had not decided to proceed by the end of the year.

The Council now have 322 house properties let on weekly tenancies, including 22 Old Persons Bungalows, representing a proportion of 35.5% of all private houses in the District, totalling 908.

(b) Private Enterprise Housing

Only 5 houses were completed for private owners, all for owner-occupation. At 31st December, however, there were 36 private houses in course of construction, most of these on plots sold on the Cotterstock Road Estate, where the Council had provided roads, sewers and other public services, the remainder being erected by a private developer.

The year 1968 should therefore show a good increase in the number of private houses built, over the figures for any proceeding year.

(c) Unfit Houses, suitable for Clearance or Demolition.

No action was taken during the year.

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(d) Grants for Conversion or Improvement.

3 grants for the provision of full Standard Amenities were approved as against 6 the previous year.

No applications for Discretionary Grants were received.

Refuse Collection and Disposal.

The regular weekly collection of house and trade refuse was maintained during the year.

The Council's new compression-loading vehicle came into service in May, 1967. Of 14 cubic yards nominal capacity, the compression device enables it to take a load of 35 cubic yards, thus reducing the number of loads involving return runs to the disposal site from the former 5 to an average of 1 per day.

The space available at the controlled tipping site of Ashton Road, Oundle is rapidly being used up and an alternative site, or method of disposal will have to be found in the near future.

Food and Drugs Act, 1955.

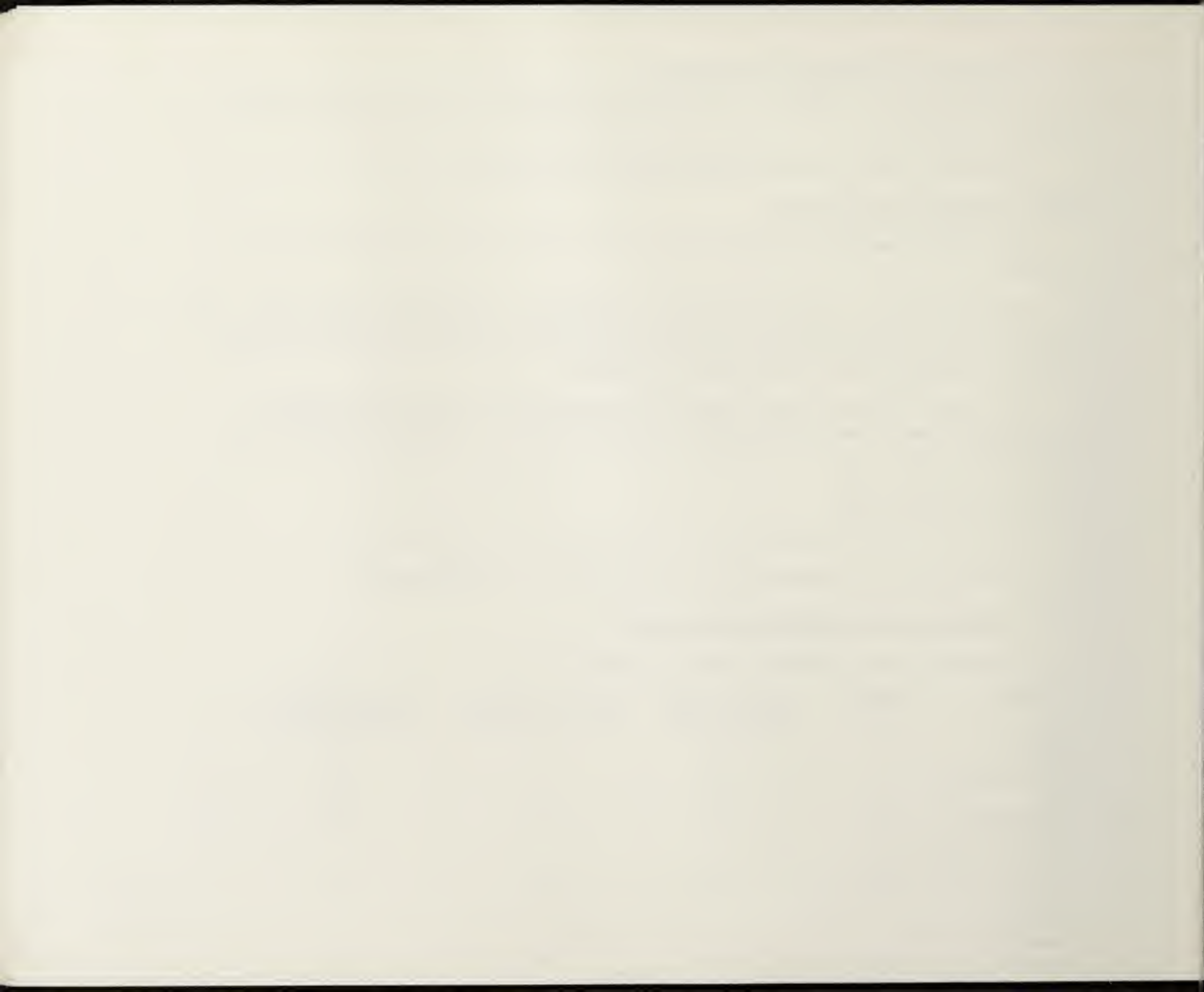
(a) There are no producer-retailers of milk within the Urban District.

(b) There are no egg pasteurisation plants within the Urban District.

(c) Food Hygiene (General) Regulations, 1960

Details of food premises subject to these Regulations:

<u>Premises</u>	<u>Number</u>	<u>No. complying with Reg. 16</u>	<u>No. to which Reg. 19 applies</u>	<u>No. complying with Reg. 19</u>
Butchers	4	4	4	4
Bakers	1	1	1	1
Confectioners	2	2	2	2
Fish	2	2	2	2
Greengrocers	2	2	2	2
Grocers, Provisions and 'General'	11	11	11	11
Hotels, Caterers, & Licensed premises	12	11	11	11



(d) There are no poultry processing premises or slaughter-houses within the district.

Food Inspection

Visits are paid to the premises listed above under (c) particularly during the summer months and the co-operation of food traders generally in maintaining a high standard of equipment, cleanliness and hygiene is appreciated.

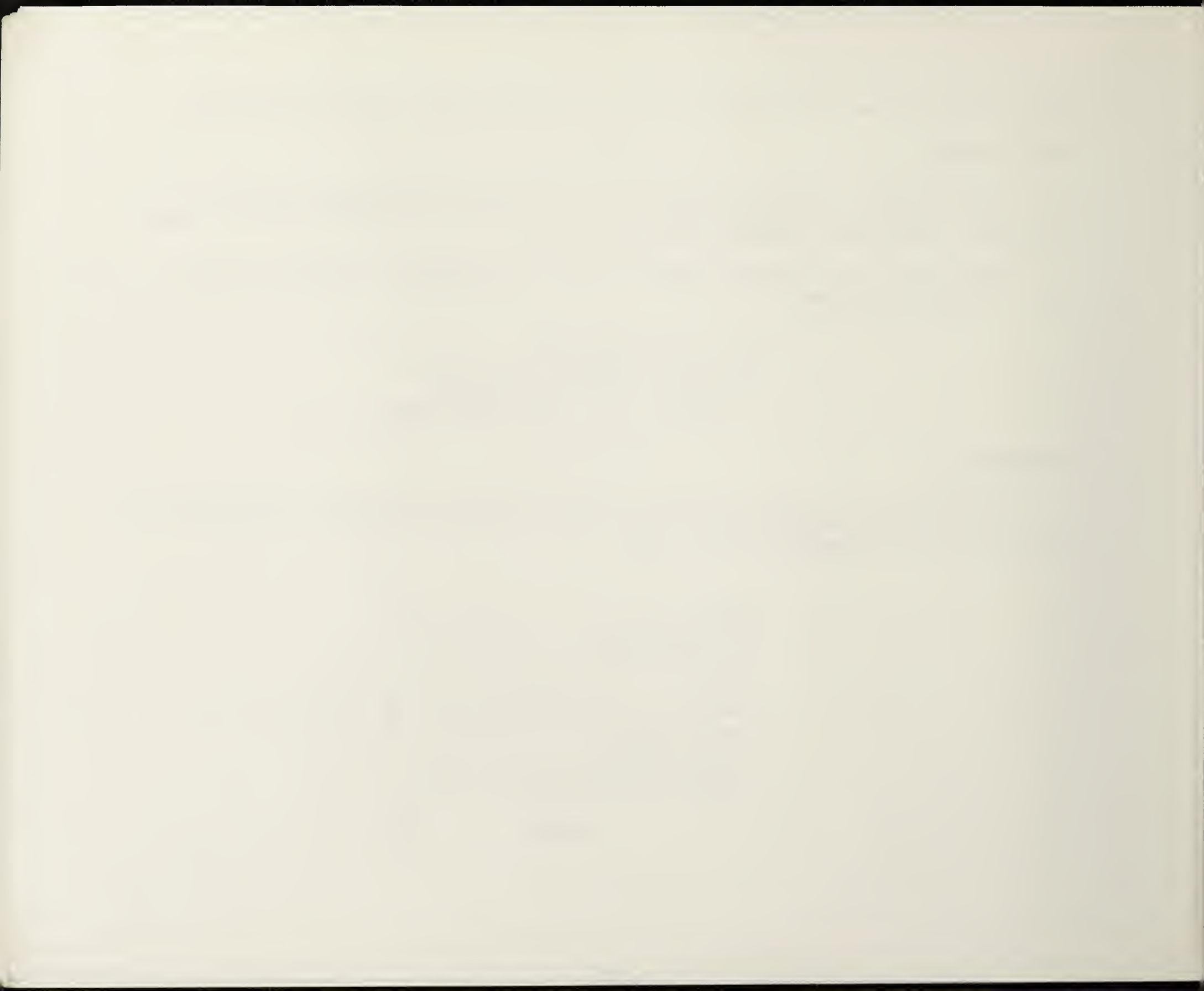
During the year the following amounts of food were voluntarily surrendered as being unfit for human consumption:

6lb. tin, Corned Beef.
355 items, packaged frozen foods.
6 x 10oz. packets lemon mousse.
7 x 10oz. " strawberry mousse.

Food Samples

I am indebted to the Chief Inspector, Weights and Measures Department, Northamptonshire County Council for the following report upon samples taken in Oundle by his Inspectors during the 12 months ended 31st March, 1968.

Milk.....	14
Butter.....	1
Buttered Fudge.....	1
Cream.....	1
Jam.....	1
Lard.....	1
Meat Products.....	6
Spiced Cookies.....	1
Tomato Juice.....	1
Vegetable Cooking Oil.....	1
	<hr/>
Total	28
	<hr/>



Remarks

Of the samples submitted to the Public Analyst during the year, all were reported to be genuine although the Analyst considered that the use of the term "Cooking Oil" was not sufficiently specific in describing a food of such type. Since the label included a declaration that soya bean oil had been used no further action was necessary.

Two samples of pasteurised milk were submitted to the Public Health Laboratory and were subjected to the methylene blue and phosphatase tests. Both samples were reported to be satisfactory.

Weights and Measures Act, 1963

1,852 articles of food were checked for weight or measure during the period under review and of these, 35 were found to be deficient.

The errors were generally of a minor nature and call for no particular comment.

F. J. Evans

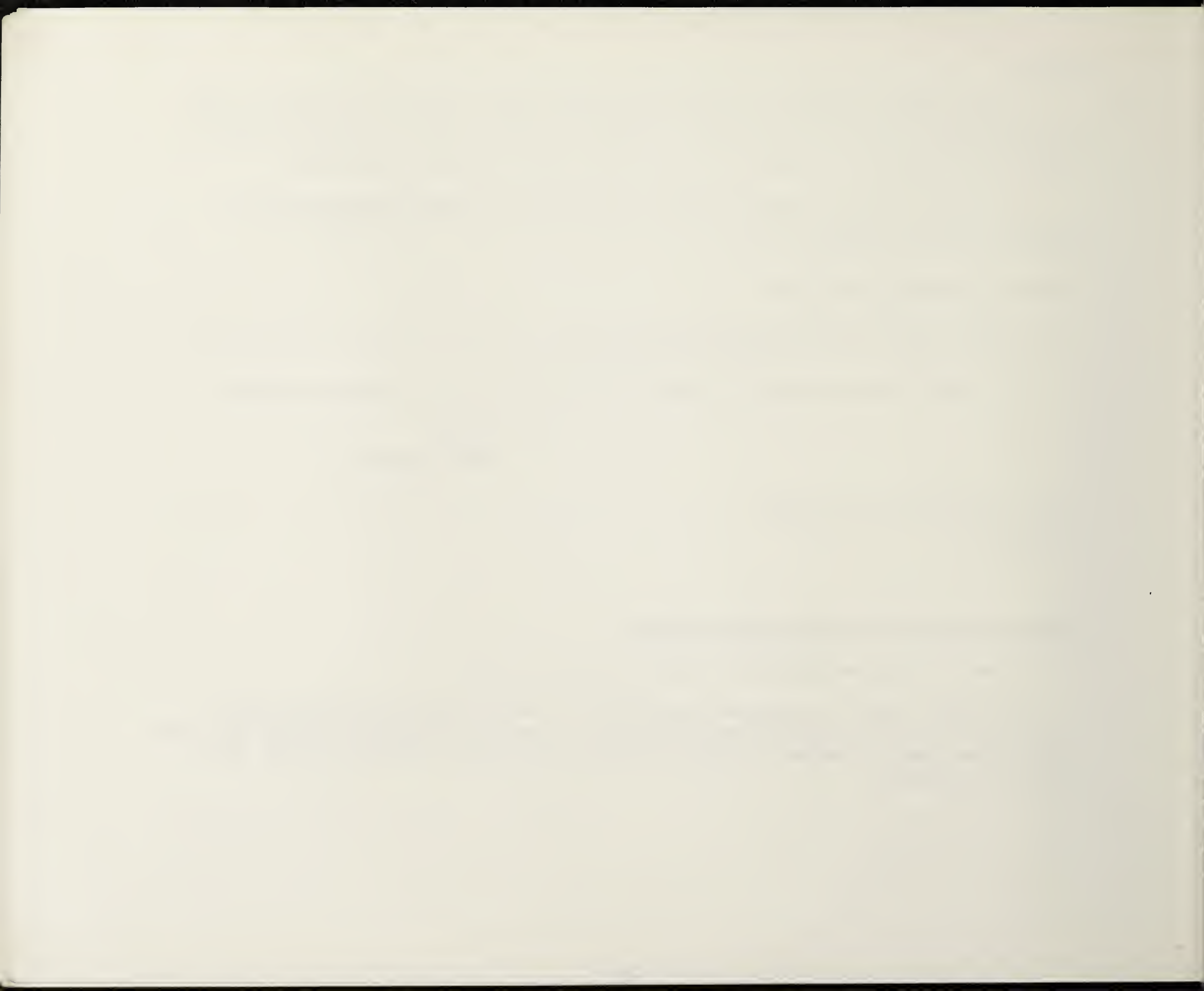
Chief Inspector.

Weights and Measures Department,
Market Street,
Battersea.

Public Conveniences, Cemetery and Churchyard

These were again maintained at a satisfactory standard.

The steps taken to reduce the possibility of damage to the public conveniences through vandalism, by removing from the interior all possible plumbing and other fixtures, and applying special finishes to walls and ceilings has been effective, reducing this damage to a minimum.



Factories Act, 1961. Part 1.

1. Inspections for purposes of provisions as to health.

Premises (1)	Number on Register (2)	Number of Inspections (3)	Written Notices (4)	Occupiers Prosecuted (5)
(i) Factories in which Sections 1,2,3,4 and 6 are to be enforced by Local Authorities	17	17	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	1	1	-	-
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises).	-	-	-	-
	18	18	-	-

Part VIII of the Act.

No outworkers premises are registered with the authority.

There are no Common Lodging Houses in the District.



Rodent Control.

All infestations were dealt with as reported or discovered.

Council owned properties particularly the refuse and sewage disposal sites are kept clear; private houses and gardens are dealt with free of charge, while payment is demanded in respect of trade premises treated.

The Council have an arrangement with Cundle Public School whereby infestations of their extensive properties are dealt with on a fixed annual charge basis; this operates satisfactorily to both parties.

As an extension of this service a number of wasps nests and two bee hives have been destroyed again this year at a charge based on time and materials; these insects can cause great annoyance and this service is much appreciated.

General.

This Report can only once again refer briefly to those aspects of the years work upon which Annual Reports are required by the Ministry of Health, i.e. those normally carried out by the Public Health Officers. The many other duties carried out by my department, which combines the work of both Public Health Inspector and Surveyor should, perhaps, be the subject of a separate report if time and the staffing position permitted it.

Financial and other details are, however, furnished to the Council, the appropriate Committees or the Ministry at the relevant times, particularly when submitting Annual Estimates.

My thanks and appreciation are once again due to the Chairman and Members of the Council, collectively and individually for their continued support and helpfulness during the year under review, and I am sure the Council would wish to express their appreciation to the outside staff for the way in which these essential public services have been maintained throughout the year, services which we are inclined to take for granted.

R. E. T. Chinnery,
Surveyor and Public Health Inspector.

